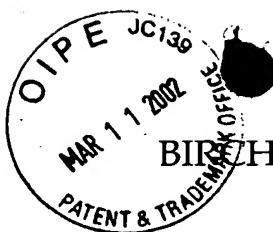


PLEASE NOTE:  
YOU MUST  
COMPLETE THE  
FOLLOWING



## BIRCH, STEWART, KOLASCH &amp; BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747  
Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

## COMBINED SUPPLEMENTAL DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verify believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:

PROCEDURE AND APPARATUS FOR THE INSTALLATION OF AN ELEVATOR

Fill in Appropriate  
Information -  
For Use Without  
Specification  
Attached:

the specification of which is attached hereto. If not attached hereto,  
the specification was filed on January 24, 2002

**RECEIVED**MAR 15 2002

as \_\_\_\_\_;

United States Application Number \_\_\_\_\_ (if applicable) and/or

and amended on \_\_\_\_\_ as PCT

the specification was filed on March 6, 1998 International Application Number PCT/FI98/00207 \_\_\_\_\_; and was

amended on \_\_\_\_\_ (if applicable)

**GROUP 3600**

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

## Prior Foreign Application(s)

## Priority Claimed

Insert Priority  
Information:  
(if appropriate)

<u>970969</u>	<u>Finland</u>
(Number)	(Country)

<u>970971</u>	<u>Finland</u>
(Number)	(Country)

<u>(Number)</u>	<u>(Country)</u>
-----------------	------------------

<u>March 7, 1997</u>
(Month/Day/Year Filed)

<u>March 7, 1997</u>
(Month/Day/Year Filed)

<u>(Month/Day/Year Filed)</u>
-------------------------------

<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes	No

<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes	No

<input type="checkbox"/>	<input type="checkbox"/>
Yes	No

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.

Insert Provisional  
Application(s):  
(if any)

<u>(Application Number)</u>	<u>(Filing Date)</u>
<u>(Application Number)</u>	<u>(Filing Date)</u>

All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:

Insert Requested  
Information:  
(if appropriate)

<u>Country</u>	<u>Application Number</u>	<u>Date of Filing (Month/Day/Year)</u>
<u>(Country)</u>	<u>(Application Number)</u>	<u>(Date of Filing (Month/Day/Year))</u>

I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

Insert Prior U.S.  
Application(s):  
(if any)

<u>09/180,353</u>	<u>January 6, 1999</u>	<u>Pending</u>
(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)
<u>(Application Number)</u>	<u>(Filing Date)</u>	<u>(Status - patented, pending, abandoned)</u>

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary.

Send Correspondence to:

**BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292**  
 P.O. Box 747 • Falls Church, Virginia 22040-0747  
 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE:  
 YOU MUST  
 COMPLETE  
 THE  
 FOLLOWING:  
 ↓

Full Name of First  
 Inventor:  
 Insert Name of  
 Inventor →  
 Insert Date This  
 Document is Signed

Insert Residence  
 Insert Citizenship →

Insert Post Office  
 Address →

Full Name of Second  
 Inventor, if any:  
 see above

Full Name of Third  
 Inventor, if any:  
 see above

Full Name of Fourth  
 Inventor, if any:  
 see above

Full Name of Fifth  
 Inventor, if any:  
 see above

Full Name of Sixth  
 Inventor, if any:  
 see above

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

GIVEN NAME/FAMILY NAME Hakan PETTERSSON	INVENTOR'S SIGNATURE	DATE* 15/2 '02
Residence (City, State & Country) Solna, Sweden		CITIZENSHIP Swedish
MAILING ADDRESS (Complete Street Address including City, State & Country) Klippgatan 12 A, 17146 Solna, Sweden		
GIVEN NAME/FAMILY NAME Gert VAN DER MEIJDEN	INVENTOR'S SIGNATURE	DATE* 18/2/02
Residence (City, State & Country) Otterlo, The Netherlands		CITIZENSHIP Dutchman
MAILING ADDRESS (Complete Street Address including City, State & Country) Arnhemsweg, 84, 6731 B.V. Otterlo, The Netherlands		
GIVEN NAME/FAMILY NAME Istvan TOTH	INVENTOR'S SIGNATURE	DATE* 15/2 '02
Residence (City, State & Country) Kista, Sweden		CITIZENSHIP Swedish
MAILING ADDRESS (Complete Street Address including City, State & Country) Stavangergatan 20 S, 16438 Kista, Sweden		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)		
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*
Residence (City, State & Country)		CITIZENSHIP
MAILING ADDRESS (Complete Street Address including City, State & Country)		